



# REGISTRATION FORM [igalzheimervalkrun.ca](http://igalzheimervalkrun.ca)

Mr  Mrs  Ms First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Email (req'd) \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

**Check Category:**  10 km Run  5 km Run  5 km Walk  1 km Walk  Other

**General \$35**  
(Ages 13-64)  **Senior \$10**  
(Ages 65+)  **Child \$10**  
(Ages 2-12)

Individual  Team  
Team name \_\_\_\_\_

Birth Date \_\_\_\_\_ mm/dd/yy

Please accept my donation of \$ \_\_\_\_\_

**Total Amount Paid:** \_\_\_\_\_  Cheque  Cash  VISA  MasterCard  Amex

**Card Number:** \_\_\_\_\_ Name on Credit Card: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_ (3-digit code on back of card)

## Mail or drop off entry form, registration fee and pledges collected to:

Alzheimer Society of Calgary, 800-7015 MacLeod Trail SW, Calgary, AB T2H 2K6 before Friday, October 7.

*Cheques Payable to Alzheimer Society of Calgary.*

**Waiver:** In consideration of my being accepted as a participant in the "Alzheimer Walk & Run" I hereby release and forever hold harmless the Alzheimer Society of Calgary, the walk/run sponsors and their respective directors, officers, volunteers, officials, agents and employees from any and all expenses, losses, claims and demands, actions and causes of action, damages and claims for injuries or damages of any kind, joint or several, anticipated or unanticipated, which the undersigned or their property may suffer as a result of participating in the walk/run and which may arise or be the result of any negligent, intentional or other action or the failure to act in any manner (and including any transportation furnished in connection therewith). Accordingly, I acknowledge that in signing this form, I understand that I am participating in the "Alzheimer Walk & Run" at my own risk. I grant permission to the Alzheimer Society of Calgary to use my name, any photos or images of me and any comments made by me in writing or otherwise, for promotional purposes in any form of media (E.g., T.V., Radio, print, video or online) at any time.

Signature \_\_\_\_\_ Date \_\_\_\_\_